

PURPOSE

To ensure that all members of the Michigan Department of Health and Human Services (MDHHS) workforce who have access to any confidential and sensitive records and information, including but not limited to those workforce members who have access to PHI or ePHI, as defined by the HIPAA Privacy and Security Rules, abide and fully comply with MDHHS privacy and security policies and procedures. MDHHS will appropriately discipline and apply sanctions to workforce members for any violations of privacy and security policies and procedures, and will investigate and reasonably mitigate privacy and security violations and incidents in a timely and accurate manner. Sanctions applied against workforce members who fail to comply with, or who violate the privacy and security policies and procedures shall be commensurate with the gravity of the violations. The aforementioned privacy and security sanctions will be enforced under a graduated system, when reasonable, and will comply with any other applicable policies and procedures, regulations and state and federal Laws.

This policy includes, but is not limited to, the aforementioned sanctions and penalties. The policy and sanctions defined in this policy must be reviewed and evaluated on a periodic basis to ensure that they maintain their viability and effectiveness.

DEFINITIONS

PHI is an acronym for Protected Health Information. It is information that can identify a person and contains health related data pertaining to that person.

ePHI is an acronym for Electronic Protected Health Information. It is information that can identify a person and contains health related data pertaining to that person.

Sanction means an official course of action that is taken or imposed in response to a noted violation or instance of non-compliance with applicable regulations, policies and procedures.

Violation means any action that is not in accordance with applicable regulations, policies and procedures.

POLICY

Any violation of MDHHS privacy and security policy shall constitute grounds for disciplinary action. MDHHS will inform all workforce members of the disciplinary action to be taken for the misuse or

misappropriation of confidential and sensitive information, including but not limited to the misuse or misappropriation of PHI and ePHI. MDHHS prohibits all privacy and security violations and all violations of HIPAA statutory and regulatory requirements, and the MDHHS policies and procedures in place to uphold them.

As appropriate and in conjunction with state and federal law, human resource policies, and MDHHS corrective action and disciplinary guidelines, Civil Service Rules and Regulations, and any other applicable rules, policies, procedures or laws, workforce members who misuse or misappropriate PHI or ePHI, in any form will be subject to graduated disciplinary sanction, when reasonable, up to and including termination. In severe cases, where a workforce member's actions involve the willful or intentional disclosure of confidential and sensitive information, sanctions may be enforced without graduated discipline.

MDHHS also reserves the right to pursue civil or criminal penalties, which may include notifying law enforcement officials and regulatory accreditation and licensure organizations.

REFERENCE

Michigan Department of Community Health Corrective Action and Disciplinary Guidelines 2001

Mental Health Code: Record Confidentiality

330.1748 Confidentiality Sec. 748

Public Health Code Act 368: HIV/AIDS Confidentiality

MCL 333.5131; Public Act 488 of 1988, as amended by Act 174 of 1989, Act 270 of 1989, Act 86 of 1992, Act 200 of 1994, and Act 57 of 1997

Michigan Civil Service Commission Rules

Chapter 2: Employment Provisions, 2-6 Discipline

CONTACT

MDHHS security officer.